

INDIANA DEPARTMENT OF HOMELAND SECURITY CODE SERVICES SECTION

302 West Washington Street, Room W246 Indianapolis, IN 46204-2739 http://www.in.gov/dhs/fire/fp_bs_comm_code/



INSTRUCTIONS: Please refer to the attached four (4) page instructions. Variance number (Assigned by department) Attach additional pages as needed to complete this application. 17-09-04 1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner) Name of applicant Mort Rubin Home owner Name of organization Telephone number College Rentals Inc. (847) 272-1234 Address (number and street, city, state, and ZIP code) 3330 Dundee Rd, Suite #4, Northbrook, IL 60062 2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (If not submitted by the applicant) Name of applicant Sara Tilley Assistant Manager Name of organization Telephone number Jeanne Walters Real Estate (812) 331-8951 Address (number and street, city, state, and ZIP code) 107 E 6th St, Bloomington, IN 47408 3. DESIGN PROFESSIONAL OF RECORD (If applicable) Name of design professional License number Name of organization Telephone number Address (number and street, city, state, and ZIP code) 4. PROJECT IDENTIFICATION Name of project State project number County Monroe Address of site (number and street, city, state, and ZIP code) 321 E University St, Bloomington, IN 47401 Type of project ☐ New ☐ Addition ☐ Alteration Change of occupancy 5. REQUIRED ADDITIONAL INFORMATION The following required information has been included with this application (check as applicable): A check made payable to the Indiana Department of Homeland Security for the appropriate amount. (see instructions) One (1) set of plans or drawings and supporting data that describe the area affected by the requested variance and any proposed alternatives. Written documentation showing that the local fire official has received a copy of the variance application. Written documentation showing that the local building official has received a copy of the variance application. 6. VIOLATION INFORMATION Has the Plan Review Section of the Division of Fire and Building Safety issued a Correction Order? ☐ Yes (If yes, attach a copy of the Correction Order.) \bowtie No Has a violation been issued? Yes (If yes, attach a copy of the Violation and answer the following.) □ No Violation issued by:

☐ Local Fire Department

7. DESCRIPTION OF REQUESTED VARIANCE		
Name of code or standard and edition involved	Specific code section	
1990 Indiana One and Two Family Dwelling Code, Section 210.2. Emergancy Education Control of the Code, Section 210.2.	on Section 210.2, Emergency Egress Openin	g\$.
210.2. Emergency Egress Openings. Nature of non-compliance (Include a description of spaces, equipment, etc. involved as necessary.)		
Emergency egress windows do not meet minimum requirements; Basement SE & SW bedrooms		
8. DEMONSTRATION THAT PUBLIC HEALTH, SAFETY, AND WELFARE WILL BE PROTECTED		
Select one of the following statements:		
Non-compliance with the rule will not be adverse to the public health, safety or welfare; or		
Applicant will undertake alternative actions in lieu of compliance with the rule to ensure that granting of the variance will not be adverse to public health, safety, or welfare. Explain why alternative actions would be adequate (be specific).		
Facts demonstrating that the above selected statement is true:		
Windows did not meet openable area and height requirements.		
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9. DEMONSTRATION OF UNDUE HARDSHIP OR HISTORICALLY SIGNIFICANT STRUCTURE		
Select at least one of the following statements:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Imposition of the rule would result in an undue hardship (unusual difficulty) because of physical limitations of the construction site or its utility services.		
Imposition of the rule would result in an undue hardship (unusual difficulty) because of major operational problems in the use of the building or structure.		
Imposition of the rule would result in an undue hardship (unusual difficulty) because of excessive costs of additional or aftered construction elements.		
imposition of the rule would prevent the preservation of an architecturally or a historically significant part of the building or structure.		
Facts demonstrating that the above selected statement is true:		
Cost to repair.		
10. STATEMENT OF ACCURACY		
TO. STATEWENT OF ACCURACT		
I hereby certify under penalty of perjury that the information cor	ntained in this application is accurate,	
Signature of applicant or person submitting application Ple	ease print name Date of sign:	alure (month, day, year)
Sara Silvey s	ara Tilley 7-7	-2017
Signature of design professional (if applicable)	ease print name Date of sign	ature (month, day, year)
11. STATEMENT OF AWARENESS (If the application is submitted on the applicant's behalf, the applicant must sign the following statement.)		
I hereby certify under penalty of perjury that I am aware of this request for variance and that this application is being submitted on my behalf.		
Signature of applicant/	ease print name Date of sign.	ature (month, day, year)
	lort Rubin X7-7,	

SE Bedroom 13-3 x 12-1: See note at bottom of page.

Existing Egress Window Measurements: Awning type, tilt in: Const. Yr. - 1910, remodeled 1993

Height: 18 inches Width: 28.75 inches Sill Height: 57 inches Openable Area: 3,59 sq. ft.

SW Bedroom 12 x 11-6: See note at bottom of page.

Existing Egress Window Measurements: Awning type, tilt in: Const. Yr. - 1910, remodeled 1993

Height: 18 inches Width: 28.75 inches Sill Height: 57 inches Openable Area: 3.59 sq. ft.

NOTE:

These measurements for the basement windows do not meet egress requirements. The existing egress window measurements for all of the basement bedrooms are as stated above. To receive a new Rental Occupancy Permit the owner will have to install new windows that meet current code requirements for the Indiana Residential Code, or apply for and receiving approval of a variance from the State of Indiana Fin Prevention and Building Safety Commission.